

10 February 1981

MEMORANDUM FOR: Chief, Management Staff, DDA

25X1 FROM:

[REDACTED]
Executive Officer,
Office of Medical Services

SUBJECT: FY 1981 Travel Limitation [REDACTED]

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REFERENCE Memo to ADDA dtd 4 Feb 81 Same Subject
(COMPT 81-0151) [REDACTED]

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25X1 1. The Office of Medical Services' (OMS) travel requirements are generally customer-oriented and often unanticipated. This makes it difficult if not impossible to budget for travel in support of new or an increased level of Agency activities. The OMS Center for Counterterrorism and Crisis Response (CCCR) activities for FY 1981 are a case in point. During the first quarter of FY 1981, 46% (\$13,000) of the total funds budgeted for OMS for FY 1981 was obligated for CCCR activities. [REDACTED]

2. A 10% reduction (see attachment) coupled with an already modest travel budget will have a deleterious effect on the entire Agency medical program, i.e., Alcohol Program, medical evacuations, covert medical evaluations and psychological assessments, continuing medical education, and survey trips, etc., but the greatest impact will be on CCCR activities. CCCR's travel falls generally into three categories:

a. Travel to provide guidance during ongoing crises as well as follow-up activities.

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Approved For Release 2003/05/27 : CIA-RDP84B00890R000800090007-6
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
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c. Travel to meetings and courses which have both educational and liaison purposes. 

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3. Because many of CCCR'S programs are interrelated, it is impossible to sustain a travel reduction in just one area. A 10% cut would impact on both 2b and 2c above. There would be a commensurate reduction in the effectiveness of training (both quantity and quality would be reduced) leading to persons being less well equipped to withstand the stresses of overseas assignment, and organizations being similarly less well equipped to deal with terrorist incidents. 

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4. Historically, OMS knows that it will be requested again, and it will respond again, to a hostage or operational crisis. Therefore, it is imperative that funds be made available for these vital and unanticipated activities. 

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